| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
|  | _(signature)_ |  | 02/18/00 |
| FEE DETERMINATION |  |  |  |
| O.I.P.E. CLASSIFIER | _EH_ | 12 | 3/7 |
| FORMALITY REVIEW |  | 60125 | 8/3/00 |
| RESPONSE FORMALITY REVIEW |  |  |  |

## INDEX OF CLAIMS

| | | | |
|---|---|---|---|
| ✔ | .......................... Rejected | N | ............................... Non-elected |
| = | .......................... Allowed | I | ............................... Interference |
| – | (Through numeral)... Canceled | A | ............................... Appeal |
| ÷ | .......................... Restricted | O | ............................... Objected |



If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)